DISTRICT OF TEXAS DIVISION CASE NUMBER:
CASE NUMBER:
09=33890
} JUDGE
CHAPTER 11
OST-CONFIRMATION OPERATING REPORT THE PERIOD  OTHER TO MAKE THE PERIOD  Confirmation Quarterly Operating Report in accordance with the
RBP 2015.
Attorney for Debtor
Attorney's Address and Phone Number:
X100 Washington Ave Suche 120

United States Trustee. Monthly Operating Reports must be filed by the 20th day of the following month:

For assistance in preparing the Post Confirmation Quarterly Operating Report, refer to the following resources on the United States Trustee website: http://www.usdoj.gov/ust/r21/index.htm.

- 1) Instructions for Preparing Debtor's Chapter 11 Post confirmation Quarterly Operating Report
- 2) Initial Filing Requirements
- 3) Frequently Asked Questions (FAQs)

To: Cathy

rom: Patricia Lilly

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MONTH	LY OPE	RAI	ľÚNG	RE	POR	Γ`-
POST CO	METRI	TAT	ÓN	·	Sec. 12.	**

ATTACHMENT NO. 1

QUESTIONNAIRE	YES*	NO
Have any assets been sold or transferred outside the normal course of business, or outside the Plan of Reorganization during this reporting period?		V
Are any post-confirmation sales or payroll taxes past due?		V
Are any amounts owed to post-confirmation creditors/vendors over 90 days delinquent?	1	V
is the Debtor current on all post-confirmation plan payments?	V	

<sup>\*</sup>If the answer to any of the above questions is "YES," provide a detailed explanation of each item on a separate sheet.

2.5		·	a transport to the second
	INSURANCE INFORMATION		<u> </u>
• •	YI.	CS	NO*
	I. Are real and personal property, vehicle/auto, general liability, fire, theft, worker's	Z	
	compensation, and other necessary insurance coverages in effect?		
	2. Are all premium payments current?	/	
. 7	🕯 and the first of the first o		

<sup>&</sup>quot;If the answer to any of the above questions is "NO," provide a detailed explanation of each item on a separate sheet.

CONFIRMATION OF INSURANCE						
TYPE of POLICY and CARRIER	Period of Coverage	Payment Amount and Frequency	Delimquency Amount			
Commercial Gen broke ling, Hel States		\$114 in	<u> </u>			
Charge Counciling 1 de 194 Al State		335 1				
	And the second second second					

Committee of the commit		San San Carlotte Control			The second second second second	the form of the second second		
and the same of the same	DESCRIBE PE	RTINENT DEVEL	OPMENTS, EVE	NTS, AND MAT	TERS DURING T	HIS REPORTING I	PERIOD:	
		engen er er Maker er var (til jurg fra 1991). Ger er var gjorden gjorden skrivet er er var er		and the following section of the second				
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Estimated Date	LIC WOODS ARL _ A		and Thomas					
ranmated Date	or rung the A	ppucauon ior r	mar Declee:	<u>Salarahan dan Kabupatèn Balangan</u> Kabupatèn Balangan				
<del></del>								-

I declare under penalty of perfury that this statement and the accompanying documents and reports are true and correct to the best of my knowledge and helief

This 29 day of March 20/1

Debtor's Signature

MONTHLY	<b>OPERA</b>	TING I	REPOR	Т-
POST CONI	TAMON	YON	arresta de la constancia de la constanci	-,114

## ATTACHMENT NO. 2

## CHAPTER 11 POST-CONFIRMATION SCHEDULE OF RECEIPTS AND DISBURSEMENTS

Case Name: Spirit & Tri	HITOM	H).	di la Cita
Case Name: SOLVET C. 164	LIVET CLOSING	LADON	vep -
Case Number: 09-3386	10-92-11		
Case Number 2			
Date of Plan Confirmation:			
Company to the feet of the company of		a all the state of	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of	Period)	Quarterly \$	Post Confirmation Tota  \$
2. INCOME or RECEI	PTS during the Period	S	18 43,660,4
3. DISBURSEMENTS			
a. Operating Expenses  (i) U.S. Trustee (		IS	<b>IS</b>
(ii) Federal Taxes			
(iii) State Taxes (iv) Other Taxes			
b. All Other Operating	Expenses:	<b>\$</b>	<b>3</b> .
c. Plan Payments:			
(i) Administrative (ii) Class One	e Claims		\$
(iii) Class Two (iv) Class Three		-8-	
(v) Class Four	onal pages as needed)		
Total Disbursements (		<b>3</b>	\$ 92,942.89
1. CASH (End of Period		\$	Is 7/7,52

B 25C (Official Form 25C) (12/08)

## UNITED STATES BANKRUPTCY COURT

In re Spirit & Truth Family Worship Center Case No. 09	933890-G3-11
Dehtor	ss Case under Chapter 11
SMALL BUSINESS MONTHLY OPERATING REP	ORT
Month: Jan - Mar/ 2011 Date filed:	
Line of Business: Religious Organization NAISC Code:	
IN ACCORDANCE WITH TITLE 28, SECTION 1746, OF THE UNITED STATES CODE, I PERJURY THAT I HAVE EXAMINED THE FOLLOWING SMALL BUSINESS MONTHLY ACCOMPANYING ATTACHMENTS AND, TO THE BEST OF MY KNOWLEDGE, THEST CORRECT AND COMPLETE.  RESPONSIBLE PARTY:	I OPERATING KELOKI AND III
Original Signature of Responsible Party	
Printed Name of Responsible Party	
Questionnaire: (All questions to be answered on behalf of the debtor.)	Yes No
1. IS THE BUSINESS STILL OPERATING?	
2. HAVE YOU PAID ALL YOUR BILLS ON TIME THIS MONTH?	
3. DID YOU PAY YOUR EMPLOYEES ON TIME?	
4. HAVE YOU DEPOSITED ALL THE RECEIPTS FOR YOUR BUSINESS INTO THE L THIS MONTH?	DIPACCOUNT 🗹 🗆
5. HAVE YOU FILED ALL OF YOUR TAX RETURNS AND PAID ALL OF YOUR TAX MONTH	xes this 💋 🗇
6. HAVE YOU TIMELY FILED ALL OTHER REQUIRED GOVERNMENT FILINGS?	
7. HAVE YOU PAID ALL OF YOUR INSURANCE PREMIUMS THIS MONTH?	
8. DO YOU PLAN TO CONTINUE TO OPERATE THE BUSINESS NEXT MONTH?	
9. ARE YOU CURRENT ON YOUR QUARTERLY FEE PAYMENT TO THE U.S. TRUS	STEE?
10. HAVE YOU PAID ANYTHING TO YOUR ATTORNEY OR OTHER PROFESSIONA MONTH?	LS THIS 👩 🗖
11. DID YOU HAVE ANY UNUSUAL OR SIGNIFICANT UNANTICIPATED EXPENSE MONTH?	S THIS
12. HAS THE BUSINESS SOLD ANY GOODS OR PROVIDED SERVICES OR TRANSF ASSETS TO ANY BUSINESS RELATED TO THE DIP IN ANY WAY?	ERRED ANY 📋 💋
13. DO YOU HAVE ANY BANK ACCOUNTS OPEN OTHER THAN THE DIP ACCOUN	vit? 📋 Ø

EXPENSES LEASE SEPARATELY LIST ALL EXPENSES PAID BY CASH OR BY CHECK FROM YOUR BANK		
EXPENSES		
(Exhibit B)		
PLEASE PROVIDE THE TOTAL AMOUNT OF CASH CURRENTLY AVAILABLE TO YOU TOTAL	\$	93.660,41
Cash on Hand at End of Month	\$	<u>. S.H.S.H.</u>
SUMMARY OF CASH ON HAND  Cash on Hand at Start of Month		
TOTAL INCOME	<b>S</b>	93,660.41
HOULD INCLUDE ALL INCOME FROM CASH AND CREDIT TRANSACTIONS. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)		
LEASE SEPARATELY LIST ALL OF THE INCOME YOU RECEIVED FOR THE MONTH. THE LIST		
INCOME		
(Exhibit A)		
FYES, PLEASE PROVIDE A WRITTEN EXPLANATION INCLUDING WHEN SUCH RETURNS WILL BE FILED, OR WHEN SUCH PAYMENTS WILL BE MADE AND THE SOURCE OF THE FUNDS FOR THE PAYMENT.		
DBLIGATIONS?		
OO YOU HAVE ANY PAST DUE TAX RETURNS OR PAST DUE POST-PETITION TAX	o	Ø
TAXES		
8. HAVE YOU PAID ANY BILLS YOU OWED BEFORE YOU FILED BANKRUPTCY?		Ø
7. HAS ANYONE MADE AN INVESTMENT IN YOUR BUSINESS THIS MONTH?		Ø
6. HAVE YOU BORROWED MONEY FROM ANYONE THIS MONTH?		Ø
5. DID ANY INSURANCE COMPANY CANCEL YOUR POLICY THIS MONTH?		Ø
4. HAVE YOU SOLD ANY ASSETS OTHER THAN INVENTORY THIS MONTH?		Ø
3 25C (Official Form 25C) (12/08)		

PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$ 0.00 TOTAL PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID SINCE THE				
B 25C (Official Form 25C) (12/08)  UNPAID BILLS  PLEASE ATTACH A LIST OF ALL DEBTS (INCLUDING TAXES) WHICH YOU HAVE INCURRED SINCE THE DATE YOU FILED BANKRUPTCY BUT HAVE NOT PAID. THE LIST MUST INCLUDE THE DATE YOU FILED BANKRUPTCY BUT HAVE NOT PAID. THE LIST MUST INCLUDE THE DEBT WAS INCURRED, WHO IS OWED THE MONEY, THE PURPOSE OF THE DEBT WAS INCURRED, WHO IS OWED THE MONEY, THE PURPOSE OF THE DEBT HAVE SINCE THE DEBT IS DUE. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.).  **TOTAL PAYABLES***  **MONEY OWED TO YOU**  PLEASE ATTACH A LIST OF ALL AMOUNTS OWED TO YOU BY YOUR CUSTOMERS FOR WORK YOU HAVE DONE OR THE MERCHANDISE YOU HAVE SOLD. YOU SHOULD INCLUDE WHO OWES YOU MONEY. HOW MUCH IS OWED AND WHEN IS PAYMENT DUE. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT).  **TOTAL RECEIVABLES***  **BANKING INFORMATION**  PLEASE ATTACH A COPY OF YOUR LATEST BANK STATEMENT FOR EVERY ACCOUNT YOU HAVE AS OF THE DATE OF THIS FINANCIAL REPORT OR HAD DURING THE PERIOD COVERED BY THIS REPORT.  **EMPLOYEES**  NUMBER OF EMPLOYEES WHEN THE CASE WAS FILED?**  **LESSIONAL FEES**  **PROFESSIONAL FEES**  **EMPKRUPTCY RELATED:**  **PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD:**  **PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD:**  **OUT THE CASE?**  **OUT THE CASE?*  **OUT				· · · · · · · · · · · · · · · · · · ·
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tom: Patricia Lilly Fax: +1 (281) 397-3714 To: Cathy Fax: +1 (713) 956-6284 Page 5 of 9 3/29/2011 2:14

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B 25C (Official Form	25C) (12/08)					
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	Projec	cted	Actual		Difference	
INCOME	\$	\$	93,660.41	\$		
EXPENSES	\$	\$	92,942.89	\$		
CASH PROFIT	\$	\$	717.52	\$		
The state was a first transfer of	TOTAL PROJECTED INCOME FOR THE NEXT MONTH:					
TOTAL PROJECTED EXPENSES FOR THE NEXT MONTH:						\$
TOTAL PROJECTED CASH PROFIT FOR THE NEXT MONTH:						<b>5</b>
ADDITIONAL INFORMATION						
PLEASE ATTACH ALL FINANCIAL REPORTS INCLUDING AN INCOME STATEMENT AND BALANCE SHEET						
WHICH YOU PREPARE INTERNALLY.						